



PTO/SB/21 (04-04)

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

4

Application Number

10/797,584

Filing Date

March 9, 2004

First Named Inventor

Benditt, David G.

Art Unit

3736

Examiner Name

Unassigned

Attorney Docket Number

021628-001010US

**ENCLOSURES (Check all that apply)**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Fee Transmittal Form                                | <input type="checkbox"/> Drawing(s)                                       | <input type="checkbox"/> After Allowance Communication to Technology Center (TC)        |
| <input type="checkbox"/> Fee Attached  | <input type="checkbox"/> Licensing-related Papers                         | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences     |
| <input type="checkbox"/> Amendment/Reply                                     | <input type="checkbox"/> Petition   | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final   | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information  |
| <input type="checkbox"/> Affidavits/declaration(s)                           | <input type="checkbox"/> Power of Attorney, Revocation                    | <input type="checkbox"/> Status Letter  |
| <input type="checkbox"/> Extension of Time Request                           | <input type="checkbox"/> Change of Correspondence Address                 | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):         |
| <input type="checkbox"/> Express Abandonment Request                         | <input type="checkbox"/> Terminal Disclaimer                              | Return Postcard   |
| <input checked="" type="checkbox"/> Information Disclosure Statement         | <input type="checkbox"/> Request for Refund                               |   |
| <input type="checkbox"/> Certified Copy of Priority Document(s)              | <input type="checkbox"/> CD, Number of CD(s) _____                        |   |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application    |   |   |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 |   |   |

Remarks

The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**Firm  
or  
Individual name

Townsend and Townsend and Crew LLP

Chun-Pok Leung

Reg. No. 41,405

Signature

Date

August 18, 2004

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name

Joy Salvador

Signature

Date

August 18, 2004



PATENT  
Attorney Docket No.: 021628-001010US

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

David G. Benditt et al.

Application No.: 10/797,584

Filed: March 9, 2004

For: DEVICES AND METHODS FOR  
DETECTING AND TREATING  
INADEQUATE TISSUE  
PERFUSION

Examiner: Unassigned

Art Unit: 3736

**INFORMATION DISCLOSURE  
STATEMENT UNDER 37 CFR §1.97 and  
§1.98**

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Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08A and PTO/SB/08B are being called to the attention of the Examiner. Copies of the references are not enclosed. It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

Applicants believe that no fee is required for submission of this statement. However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



Chun-Pok Leung  
Reg. No. 41,405

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PTO/SB/08A (08-03)

<b>Substitute for form 1449A/PTO</b>  <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  (use as many sheets as necessary)		<b>Complete if Known</b>			
		Application Number	10/797,584		
		Filing Date	March 9, 2004		
		First Named Inventor	Benditt, David G.		
		Art Unit	3736		
		Examiner Name	Unassigned		
Sheet	1	of	1	Attorney Docket Number	021628-001010US

U.S. PATENT DOCUMENTS+					
Examiner Initials*	Cite No. <sup>1</sup>	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number Kind Code <sup>2</sup> (if known)			
	AA	US-5,487,760	01-30-1996	Villafana	
	AB	US-5,913,879	06-22-1999	Ferek-Petri et al.	
	AC	US-6,647,295 B2	11-11-2003	Florio et al.	
	AD	US-6,662,047 B2	12-09-2003	Sorensen et al.	
	AE	US-6,625,492 B2	09-23-2003	Florio et al.	
	AF	US-6,351,670 B1	02-26-2002	Kroll	
	AG	US-6,491,639 B1	12-10-2002	Turcott	
	AH	US-			
	AI	US-			
	AJ	US-			
	AK	US-			
	AL	US-			
	AM	US-			
	AN	US-			
	AO	US-			
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FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>
		Country Code <sup>3</sup>	Number <sup>4</sup>	Kind Code <sup>5</sup> (If Known)				
	AU							<input type="checkbox"/>
	AV							<input type="checkbox"/>
	AW							<input type="checkbox"/>
	AX							<input type="checkbox"/>
	AY							<input type="checkbox"/>
	AZ							<input type="checkbox"/>
	BA							<input type="checkbox"/>
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Examiner Signature		Date Considered	
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Kind Codes of U.S. Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. <sup>6</sup> Applicant is to place a check mark here if English language Translation is attached.

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